

EVALUATION
2011 SUMMER READING PROGRAM
Nebraska Library Commission



Please fill out the following form when your summer program is completed.

Return it to: Sally Snyder
Nebraska Library Commission
1200 N Street, Suite 120
Lincoln, NE 68508-2023

Library: _____

Dates of your summer reading program: _____

Number of programs held: _____

How many children attended, in total _____ or, on average _____

Please describe special programs, materials or services that you offered:

What outcomes of your efforts for children did you observe or hear about? _____

Was the SRP manual helpful to you? _____

What did you like best about the manual? _____



Thank you for your input!